Debtor 1	Veronica		Neal
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
Jnited States Ban	kruptcy Court for the:	Eas	stern District of Michigan
Case number	19-4197		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B. \$0.00 1b. Copy line 62, Total personal property, from Schedule A/B..... **\$13,517.00** 1c. Copy line 63, Total of all property on Schedule A/B..... \$13,517.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D...... \$9,865.96 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... \$0.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$8,945.60 Your total liabilities \$18,811.56 Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I..... \$1,674.14 5. Schedule J: Your Expenses (Official Form 106J)

Official Form 106Sum

Copy your monthly expenses from line 22c of Schedule J.....

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

\$2,896.48

Case number (if known) 19-4/979

\$0.00

\$0.00

Part 4: Answer These Questions for Administrative and Statistical Records

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to Yes	o the court with your other schedules.
 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individing family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. Your debts are not primarily consumer debts. You have nothing to report on this part of the fithis form to the court with your other schedules. 	28 U.S.C. § 159.
 From the Statement of Your Current Monthly Income: Copy your total current monthly income from 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 	om Official \$764.43
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	
	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00

9g. Total. Add lines 9a through 9f.

claims. (Copy line 6g.)

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 2 of 2

Fill in this information	on to identify your cas	e and this filing		
Debtor 1	Veronica		Neal	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Banl	cruptcy Court for the:	Eas	stern District of Michigan	
Case number	19-41979	?		

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: Describe Each Residence Buildin

Street address, if availadescription	able, or other	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	the amount of any sec D: Creditors Who Hav	d claims or exemptions. Pu cured claims on Schedule re Claims Secured by
City	State ZIP Code	☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare	Property. Current value of the entire property?	Current value of the portion you own?
County		Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Describe the nature of (such as fee simple, te a life estate), if known.	your ownership interest nancy by the entireties, or
		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another all of your entries from Part 1, including any entries	Check if this is com	imunity property

Official Form 106A/B

Schedule A/B: Property

Part 2: Describe Your Vehicles

. (Cars, vans, trucks, tractor	s, sport utility v	ehicles, motorcycles		
i	No Yes				
	3.1 Make:	GMC	Who has an interest in the property? Check one.		
	Model:	G6	Debtor 1 only Debtor 2 only	Do not deduct secured the amount of any sec D: Creditors Who Have	d claims or exemptions. Pured claims on Schedule
	Year:	2010	Debtor 1 and Debtor 2 only At least one of the debtors and another	Property.	
	Approximate mileage: Other information:	163,861	Check if this is community property	Current value of the entire property? unknown	Current value of the portion you own? unknown
	VIN: 1G2ZA5E05A415	55569	(see instructions)		
lf y	ou own or have more than	n one, list here:			
3.	2 Make:	Buick	Who has an interest in the property? Check one.	Do not doduct cooured	claims or exemptions. Put
	Model:	Lacrosse	Debtor 1 only Debtor 2 only	the amount of any secu	red claims on Schedule
	Year:	2010	Debtor 1 and Debtor 2 only At least one of the debtors and another	Property.	oldinis Geoured Dy
	Approximate mileage:	95,154	_	Current value of the entire property?	Current value of the portion you own?
	Other information: VIN: 1G4GD5EG0AF29	92961	Check if this is community property (see instructions)	\$6,967.00	\$6,967.00
			1		
	atercraft, aircraft, motor h <i>tamples:</i> Boats, trailers, mo No Yes	omes, ATVs and otors, personal v	d other recreational vehicles, other vehicles, and acceptational vehicles, other vehicles, and acceptate acceptate and acceptate and acceptate and acceptate and acceptate and acceptate acceptate and acceptate and acceptate acceptate and acceptate acceptate and acceptate acceptate and acceptate acceptate acceptate and acceptate a	cessories ccessories	
. Ac	No No Yes Id the dollar value of the p	otors, personal v	d other recreational vehicles, other vehicles, and acceptate real fishing vessels, snowmobiles, motorcycle at for all of your entries from Part 2, including any entries here	ccessories	\$6,967.00
2 2 2 2 5. Ac	No No Yes Id the dollar value of the p u have attached for Part 2	otors, personal v portion you own 2. Write that nun	ratercraft, fishing vessels, snowmobiles, motorcycle a for all of your entries from Part 2, including any ent	ccessories	\$6,967.00
i. Ac	No Yes Id the dollar value of the purple of	portion you own 2. Write that nun	ratercraft, fishing vessels, snowmobiles, motorcycle a for all of your entries from Part 2, including any ent	ccessories	\$6,967.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
i. Ac yo	No Yes Id the dollar value of the purpose attached for Part 2 Describe Your Personal No.	cortion you own Write that nun onal and Hous requitable inte	for all of your entries from Part 2, including any entriber here	ccessories	Current value of the portion you own? Do not deduct secured

Official Form 106A/B

6.

Schedule A/B: Property

	ebtor 1	Veronica First Name	Middle Name	Neal Last Name	Case number (if known)	19-41979
7	. Electro	mine				
•		les: Televisions ar	nd radios: audio, video, stel	rec and digital agricument	mputers, printers, scanners; music	
	□ No	collections; el	ectronic devices including	cell phones, cameras, media	mputers, printers, scanners; music players, games	
	Yes.	. Describe	See Attached.			\$1,000.00
						\$1,000.00
8.		ibles of value				
	Example	es: Antiques and to stamp, coin, or	igurines; paintings, prints, r baseball card collections:	or other artwork; books, pictui other collections, memorabili	res, or other art objects;	
	M No				a, collectibles	
	☐ Yes.	Describe				
9.	Equipme	ent for sports and	hobbies			
		es: Sports, photog	raphic, exercise, and other	hobby equipment; bicycles, r	pool tables, golf clubs, skis; canoes	
	M No	and kayaks; ca	rpentry tools; musical instr	uments	services goli olabo, silis, callogs	
		Describe				
10.	. Firearm Exampl		shotguns, ammunition, and	4 m. 4 . 4		
	∠ No	ı		related equipment		
	☐ Yes.	. Describe				
11	Clothes					
•••			ies, furs, leather coats, des	signer wear, shoes, accessorie	oe.	
	□ No	5	Clothes			
	war yes.	Describe				\$500.00
12.	Jewelry					
	_	es: Everyday jewe	lry, costume jewelry, engag	gement rings, wedding rings, t	neirloom jewelry, watches, gems,	
	□ No	9010, 311701				
	Yes.	Describe	Costume Jewelry			\$50.00
40	B1					
13.		n animals es: Dogs, cats, biro	is horses			
	M No	г				
	☐ Yes. i	Describe				
14.	Any othe	er personal and ho	uscabold itama dist dist	4.		
	M No			t already list, including any h	nealth aids you did not list	
		Describe				
45	A - 1 + 4 ·					
15.	for Part 3	dollar value of all o	of your entries from Part 3 er here	, including any entries for pa	ges you have attached	
						\$6,550.00
Part	4: Desc	cribe Your Finar	icial Assets			
	Form 106					
Juicia	10th 106	en o		Schedule A/B: Prop	erty	page 3

_	00.01	veronica		Neal		fknown) _ 19-41979
		First Name	Middle Name	Last Name	Case number (i	f known)
[Do you own o	r have any lega	l or equitable interest in	any of the following?		Current value of the
				_		Current value of the portion you own?
						Do not deduct secured
						claims or exemptions.
16	6. Cash					
	Examples:	Money you ha	ve in your wallet, in your	home, in a safe deposit bo	x, and on hand when you file your	
	MO No	Padalon				
	Yes				Cash	
					Cash	••••
17	. Deposits o	of money				
		-	nge oreiherfinentil			
		and other simil	ar institutions. If you hav	counts; centificates of depo	sit; shares in credit unions, brokerage same institution, list each.	houses,
	M No		, , , , , , , , , , , , , , , , , , , ,	o manapic docodina with the	same institution, list each.	
	☐ Yes	*****				
			Institution name:			
17.	1. Checking a	ecount.				
						_
47	0.05					
17.	2. Checking a	ccount:				_
						_
17.	3. Savings ac	count:				
						=
17.	4. Savings acc	count:				
		•				-
17 9	5. Certificates	of donosit:				
• • • •	b. Cerunicates	or deposit.				_
17.6	6. Other finance	cial account:				_
						_
17.7	7. Other finance	cial account:				
						-
17.8	3. Other financ	cial account:				
						-
170). Other finance	sial a a a a				
17.0	. Outer illiand	al account:				•
18.	Bonds, muti	ual funds, or ou	blicly traded stocks			
				okerage firms, money mark		
	M No		ourielli doodaniis Will bi	okerage mins, money mark	et accounts	
	Yes					
19.			nd interests :- :	-44	_	
	an LLC, part	nership, and joi	nt venture	ated and unincorporated b	susinesses, including an interest in	
	₩ No					
	Yes. Give	specific				
	informatio	on about				
	them	***************************************				

Schedule A/B: Property

Schedule A/B: Property

De	btor 1	Veronica	Neal		10 1/1979
		First Name Middle	Name Last Name	Case number (if known)	17-41/11
28.	Tax refund	ds owed to you			
	M No				
	Yes. G	ive specific information		Federal:	
	at vo	out them, including whether ou already filed the returns		-	
	ar	nd the tax		State:	
	ye	ears		Local:	
20				-	
29.	Family sup	•			
	examples:	Past due or lump sum alimon	y, spousal support, child support, maintenance, divorce set	tlement, property settleme	nt '
	☑ No				
	Yes. Gi	ve specific		¬	
	m	ormation		Alimony:	
				Maintenance: _	
				Support:	
				Divorce settlement:	
				Property settlement:	
		•			
30.	Other amou	unts someone owes you			
	Examples:	Unpaid wages, disability insur	ance payments, disability benefits, sick pay, vacation pay,	vorkers'	
	M No	compensation, Social Security	benefits; unpaid loans you made to someone else		
	Yes. Giv	re specific [
	info	ormation			
		•			
21	Imtoronto in				
31.		insurance policies			
	M No	rieduri, disability, of the insural	nce; health savings account (HSA); credit, homeowner's, or	r renter's insurance	
	Yes. Nar	me the insurance company			
	of e	ach policy and list its value	Company name: Beneficia	iry: Sum	ender or refund value:
32.	Anv interest	t in property that is due you fi	rom company who has died		
			xpect proceeds from a life insurance policy, or are currently	a matal and day was a transfer	
	biobeira nec	ause someone has died.	Apost processes from a life insurance policy, or are currently	entitled to receive	
	No				
	Yes. Give	e specific rmation			
		L			
33.	Claims agaiı	nst third parties, whether or n	ot you have filed a lawsuit or made a demand for paymer	nt	
	Examples: A	Accidents, employment dispute	es, insurance claims, or rights to sue		
	No No				
	■ Yes. Des	cribe each claim			
		_			

Schedule A/B: Property

De	DIOL 1	Veronica		Neal		19-111979
		First Name	Middle Na	ame Last Name	Case number (if known)	19-41979
34	Other contin			_		
U -7.	to set off clai	gentano (ms	uniquidated claims	s of every nature, including counterclaim	s of the debtor and rights	
	No No		. г			
	₩ Yes. Desc	ribe each	claim			
			L			
35.	Any financial	assets vo	u did not already l	in4		
			a did not alleady i	15t		
	No No		Γ-			
	Yes. Give	specific nation				
	111011	1144011	···· L			
36.	Add the dollar	r value of a	all of your entries t	from Part 4, including any entries for pag	IPS VOIL have attached	
	for Part 4. Wri	te that nu	mber here			\$0.00
						40.00
D	45. D					
				roperty You Own or Have an Intere		t 1.
37.	Do you own o	r have any	/ legal or equitable	interest in any business-related property	v?	
	No. Go to F	Part 6.			•	
	Yes. Go to	line 38.				
						Current value of the
						portion you own?
						Do not deduct secured claims or exemptions,
38.	Accounts rece	ivable or o	commissions you	aireadu aarnad		•
	_			ancady earned		
	No Yes. Descri	. .				
	Tes, Descri	De	L			
39.			hings, and supplie			
	Examples: Bus	siness-rela	ited computers, sof	tware, modems, printers, copiers, fax mac	chines, rugs, telephones, desks, chairs	electronic devices
	N o				,	0.001.01110 007,000
	Yes. Descrit	ho				
40		_				
		ures, equi	pment, supplies yo	ou use in business, and tools of your trac	de	
	☑ No	1				
	Yes. Describ	be				
11	Inventory					
	-					
	Mo No	-				
	Yes. Describ	е	4			
		•				
2	Interests in nort	tnerchine	or joint ventures			
		arei ai ii þS	or Jourt Acutmes			
	No No					
	Yes. Describ	e				

Schedule A/B: Property

De	btor 1	Veronica	Neal		10 1/1000
		First Name	Middle Name Last Name	Case number (if known)	19-41979
			Last Halle		·
43	. Custom	er lists, mailing lists, o	or other compilations		
	☑ No				
	☐ Ves I	Do vous lists include -			
	- 103.	oo your iists triciuge p	personally identifiable information (as defined in 1	1 U.S.C. § 101(41A))?	
		■ No			
		Yes. Describe			
44.	Any busi	ness-related property	you đid not already list		
			y an and the amount hat		
	M No				
	Yes. C	Give specific			
	inform	nation			
45.	Add the c	ioliar value of all of yo	our entries from Part 5, including any entries for p	2000 you boy offer t	
	for Part 5	. Write that number he	ere	ages you have attached	
				-	\$0.00
D	4 C Bana				
Par	TO: Nest	nde any rann- and	Commercial Fishing-Related Property You O)wn or Have an Interest In.	
	ir you	own or have an inter	est in farmland, list it in Part 1.		
46.	Do you or	wn or have any legal o	or equitable interest in any farm- or commercial fis		
	No Go	to Part 7.	- equiable interest in any larin- of continercial his	sning-related property?	
	Yes. G	o to line 47.			
					Commond realists and the
					Current value of the
					portion you own? Do not deduct secured
					claims or exemptions.
47.	Farm anin	nals			
	Evennles	Livestock, poultry, far			
		Livestock, poully, fai	rm-raised tish		
	Mo No				
	☐ Yes				
48	Croneoi	ther growing or harve	- A A		
-10.		arei growing or narve:	sted		
	N o				
		ve specific			
	informa	tion			
	monia			Ť	
49.	Farm and i	ishing equipment, im	plements, machinery, fixtures, and tools of trade		
			,,		
	Mo No				
	☐ Yes				
50.	Farm and f	ishing supplies, chem	ticals, and food		
		gppnoo, onen	nocis, and reed		
	Mo No				
	Yes				
E4	A				
31. /	Any tarm- a	ind commercial fishin	g-related property you did not already list		
	No		-		
,	Yes. Giv	e specific			
	mormat	ion		1	
					

Schedule A/B: Property

ם	ebtor 1	Veronica First Name		Neal	Caco number (64)	OWN) 19-41979
		rust Name	Middle Name	Last Name	—— Case number (if knk	own)
5	2. Add the do for Part 6. t	llar value of all of Write that number	your entries from Part here	6, including any entries for p	ages you have attached	\$0.00
		•			•	70.30
P	art 7: Descr i	ibe Ali Property	You Own or Have a	n Interest in That You Di		
			_		Not List Above	
53	5. Do you hav	e other property o	of any kind you did not	already list?		
	Examples:	Season tickets, co	ountry club membership			
	Yes. Giv	e specific				
	informati	on				
E 4	A 1 1 4 1 .				· · · · · · · · · · · · · · · · · · ·	
54.	. Add the doll	ar value of all of y	our entries from Part 7	. Write that number here		\$0.00
Рa	rt 8: List the	Totals of Eact	Part of this Form			
3 5,	Part 1: Total	real estate, line 2.	•••••••••••••••••••••••••••••••••••••••			\$0.00
					-	\$0.00
56.		real estate, line 2. vehicles, line 5		\$6,967.00		\$0.00
56.	Part 2: Total	vehicles, line 5		\$6,967.00	→	\$0.00
	Part 2: Total	vehicles, line 5	sehold items, line 15		→	\$0.00
56.	Part 2: Total	vehicles, line 5 personal and hou	sehold items, line 15	\$6,967.00 \$6,550.00	→	\$0.00
56. 57.	Part 2: Total	vehicles, line 5	sehold items, line 15	\$6,967.00	→	\$0.00
56. 57. 58.	Part 2: Total Part 3: Total Part 4: Total	vehicles, line 5 personal and hou	sehold items, line 15 ine 36	\$6,967.00 \$6,550.00 \$0.00	•	\$0.00
56. 57. 58.	Part 2: Total Part 3: Total Part 4: Total Part 5: Total	vehicles, line 5 personal and hou financial assets, li pusiness-related p	sehold items, line 15 ine 36 property, line 45	\$6,967.00 \$6,550.00 \$0.00	•	\$0.00
56. 57. 58.	Part 2: Total Part 3: Total Part 4: Total Part 5: Total	vehicles, line 5 personal and hou financial assets, li pusiness-related p	sehold items, line 15 ine 36	\$6,967.00 \$6,550.00 \$0.00	•	\$0.00
56. 57. 58. 59.	Part 2: Total Part 3: Total Part 4: Total (Part 6: Total (vehicles, line 5 personal and hou financial assets, li business-related p	sehold items, line 15 ine 36 property, line 45 related property, line 52	\$6,967.00 \$6,550.00 \$0.00	•	\$0.00
56. 57. 58.	Part 2: Total Part 3: Total Part 4: Total (Part 6: Total (vehicles, line 5 personal and hou financial assets, li pusiness-related p	sehold items, line 15 ine 36 property, line 45 related property, line 52	\$6,967.00 \$6,550.00 \$0.00	•	\$0.00
56.57.58.59.60.61.	Part 2: Total Part 3: Total Part 4: Total 1 Part 5: Total 1 Part 6: Total 1 Part 7: Total 6	vehicles, line 5 personal and hou financial assets, li pusiness-related p farm- and fishing-	sehold items, line 15 ine 36 property, line 45 related property, line 52 ilisted, line 54	\$6,967.00 \$6,550.00 \$0.00 \$0.00 \$0.00 \$0.00		\$0.00
56.57.58.59.60.61.	Part 2: Total Part 3: Total Part 4: Total 1 Part 5: Total 1 Part 6: Total 1 Part 7: Total 6	vehicles, line 5 personal and hou financial assets, li pusiness-related p farm- and fishing-	sehold items, line 15 ine 36 property, line 45 related property, line 52	\$6,967.00 \$6,550.00 \$0.00 \$0.00 \$0.00 \$0.00	Copy personal property total→	\$0.00 + \$13.517.00
56.57.58.59.60.61.	Part 2: Total Part 3: Total Part 4: Total 1 Part 5: Total 1 Part 6: Total 1 Part 7: Total 6	vehicles, line 5 personal and hou financial assets, li pusiness-related p farm- and fishing-	sehold items, line 15 ine 36 property, line 45 related property, line 52 ilisted, line 54	\$6,967.00 \$6,550.00 \$0.00 \$0.00 \$0.00 \$0.00		
56.57.58.59.60.61.62.	Part 2: Total Part 3: Total Part 4: Total 1 Part 6: Total 1 Part 6: Total 1 Part 7: Total c Total persona	vehicles, line 5 personal and hou financial assets, li pusiness-related p farm- and fishing- other property not	sehold items, line 15 ine 36 property, line 45 related property, line 52 listed, line 54 es 56 through 61	\$6,967.00 \$6,550.00 \$0.00 \$0.00 \$0.00 + \$0.00	Copy personal property total→	
56.57.58.59.60.61.62.	Part 2: Total Part 3: Total Part 4: Total 1 Part 6: Total 1 Part 6: Total 1 Part 7: Total c Total persona	vehicles, line 5 personal and hou financial assets, li pusiness-related p farm- and fishing- other property not	sehold items, line 15 ine 36 property, line 45 related property, line 52 listed, line 54 es 56 through 61	\$6,967.00 \$6,550.00 \$0.00 \$0.00 \$0.00 \$0.00	Copy personal property total→	

Schedule A/B: Property

Debtor 1 Veronica Neal

Neal
Middle Name Last Name

SCHEDULE A/B: PROPERTY

Continuation Page

7. Electronics

First Name

62" Television	
32" Television	\$500.00
42" Television	\$100.00
42" Television	\$200.00
	\$200.00

Official Form 106A/B

Schedule A/B: Property

Debtor 1	Veronica	Neal	·		
	First Name	Middle Name Last Name	.		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name Last Name	·		
United States Bank	ruptcy Court for the	Eastern District of Michigan			
Case number	19-419			-	
(if known)	<u></u>			Check if amende	f this is an
					g
official Form	106D				
e as complete and a	ccurate as nossible	rs Who Have Claims Secure If two married people are filing together, both are equal ie, fill it out, number the entries, and attach it to this for			12/1 prmation. If more
Do any creditors ha				maranan pagoo, iii	ne your name and
No. Check this h	ox and submit this f	orm to the court with your attended to be			
Yes. Fill in all of	the information below	orm to the court with your other schedules. You have not	ning else to report on ti	his form.	
art 1: List All Se					
1 !-4 -1!					
. LIST 311 Secured c	laims If a creditor h	as more than an account of the second			
separately for each	in claim. If more that	as more than one secured claim, list the creditor none creditor has a particular claim, list the other	Column A	Column B	Column C
separately for eac	in claim. If more that	as more than one secured claim, list the creditor n one creditor has a particular claim, list the other ole, list the claims in alphabetical order according to the	Amount of claim Do not deduct the	Value of collateral that	Column C Unsecured portion
creditors in Part 2	in claim. If more that	D One creditor has a particular claim, list the ethan	Amount of claim Do not deduct the value of	Value of	Unsecured
creditors in Part 2 creditor's name. American First Fi	in ciaim. It more tha . As much as possit	n one creditor has a particular claim, list the other ole, list the claims in alphabetical order according to the	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
creditors in Part 2 creditor's name. American First Ficeditor's Name	in ciaim. It more tha . As much as possit	n one creditor has a particular claim, list the other ole, list the claims in alphabetical order according to the Describe the property that secures the claim: Loveseat, Couch, 2 End Tables, 1 Cocktail	Amount of claim Do not deduct the value of	Value of collateral that supports this	Unsecured portion If any
creditors in Part 2 creditor's name. American First Fi	n ciaim. If more that . As much as possit nance	n one creditor has a particular claim, list the other ole, list the claims in alphabetical order according to the	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
American First Fi Creditor's Name Po Box 565848 Number Stre Dallas, TX 75356	n ciaim. If more that. As much as possit	Describe the property that secures the claim: Loveseat, Couch, 2 End Tables, 1 Cocktail Table As of the date you file, the claim is: Check all that	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
creditors in Part 2 creditor's name. American First Fi Creditor's Name Po Box 565848 Number Stre Dallas, TX 75356 City	nance et -5848 State ZIP Co	Describe the property that secures the claim: Loveseat, Couch, 2 End Tables, 1 Cocktail Table As of the date you file, the claim is: Check all that apply.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
American First Fi Creditor's Name Po Box 565848 Number Stre Dallas, TX 75356	nance et -5848 State ZIP Co	Describe the property that secures the claim: Loveseat, Couch, 2 End Tables, 1 Cocktail Table As of the date you file, the claim is: Check all that apply. Contingent	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
American First Fi Creditor's Name Po Box 565848 Number Stre Dallas, TX 75356 City Who owes the de	nance et -5848 State ZIP Co	Describe the property that secures the claim: Loveseat, Couch, 2 End Tables, 1 Cocktail Table As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
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creditor's name. American First Fi Creditor's Name Po Box 565848 Number Stre Dallas, TX 75356 City Who owes the de Debtor 1 only Debtor 2 only Debtor 1 and D At least one of	et State ZIP Co bt? Check one. Debtor 2 only the debtors and	Describe the property that secures the claim: Loveseat, Couch, 2 End Tables, 1 Cocktail Table As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
American First Fi Creditor's name. American First Fi Creditor's Name Po Box 565848 Number Stre Dallas, TX 75356 City Who owes the de Debtor 1 only Debtor 2 only Debtor 1 and D At least one of another Check if this cl community del Date debt was inc	et As much as possit nance et As Example 1	Describe the property that secures the claim: Loveseat, Couch, 2 End Tables, 1 Cocktail Table As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
American First Fi Creditor's name. American First Fi Creditor's Name Po Box 565848 Number Stre Dallas, TX 75356 City Who owes the de Debtor 1 only Debtor 2 only Debtor 1 and D At least one of another Check if this cleonmunity del	et As much as possit nance et As Example 1	Describe the property that secures the claim: Loveseat, Couch, 2 End Tables, 1 Cocktail Table As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of <u>3</u>

Debtor 1	Veronica First Name Midd	Neal le Name Last Name	Case numb	er (if known) <u>19</u>	-41979
Part 1:	Additional Page After listing any entries on followed by 2.4, and so for	this page, number them beginning with 2.3, th.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor	of Michigan Auto Sales 's Name E 8 Mile Rd	Describe the property that secures the claim: 2010 Buick Lacrosse	\$1,770.00	\$6,967.00	\$0.00
Detroit City Who ov Debt Debt At lea	MI 48205 State ZIP Code was the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only ast one of the debtors and her is if this claim relates to a munity debt bt was incurred	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Cther (including a right to offset)			
Creditor's 25505 V	V 12 Mile Rd	Describe the property that secures the claim: 2010 GMC G6	\$5,684.00	\$0.00	\$5,684.00
City Who ow Debto Debto At lea anoth Checl	or 2 only or 1 and Debtor 2 only st one of the debtors and er k if this claim relates to a nunity debt	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Cother (including a right to offset) Last 4 digits of account number 8 7 6 6			
Add the	dollar value of your entries in Co	lumn A on this page. Write that number here:	\$7.454.4	201	
		e dollar value totals from all pages. Write that number	\$7,454.0 \$9,865.9		

Official Form 106D

Debtor 1

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page <u>2</u> of <u>3</u>

/eronica		Neal	
irst Name	Middle Name	Last Name	
	······································	Last Hanie	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Simm Associates INC. Name		On which line in Part 1 did you enter the creditor?1
Po Box 7526 Number Street		Last 4 digits of account number 1 0 0 8
Newark, DE 19714-7526 City	State ZIP Code	_ -

Fill in this information to	identify your ca	se;		7			
Debtor 1	Veronica		Neal				
	First Name	Middle Name	Last Name				
Debtor 2				1			
Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankrup	tcy Court for the:	E	astern District of Michigan	1			
Case number	19-1119	79	and the District of Intolligan	1			
(if known)	7-9//					Check if th	is is an
				l		amended f	
as complete and accurty to any executory co SA/B) and on Schedule slisted in Schedule D:	rate as possible. Intracts or unexp G: Executory Co Creditors Who He Ich the Continuat	Use Part 1 for cr ired leases that co intracts and Une old Claims Secul ion Page to this	Have Unsecured C reditors with PRIORITY claims and Part could result in a claim. Also list execute xpired Leases (Official Form 106G). Do red by Property. If more space is neede page. On the top of any additional page	2 for creditors vory contracts on not include any	creditors with	<i>l: Property</i> (C n partially sec	official Form Cured claims t
possible, list the claim Part 1. If more than on	e priority unsecure y unsecured claim laim it is. If a claim s in alphabetical o	ed claims against as. If a creditor has has both priority a der according to the	s more than one priority unsecured claim, I and nonpriority amounts, list that claim her the creditor's name. If you have more than	two priority unse	parately for eac priority and nor cured claims, fi	ch claim. For e priority amou il out the Cont	each claim liste nts. As much a inuation Page (
Yes. List all of your priority identify what type of clipossible, list the claim Part 1. If more than on	e priority unsecure y unsecured claim laim it is. If a claim s in alphabetical o	ed claims against as. If a creditor has has both priority a der according to the	s more than one priority unsecured claim, I and nonpriority amounts, list that claim her	two priority unse	parately for eac priority and nor cured claims, fi Total claim	ch claim. For e apriority amou il out the Cont Priority amount	each claim liste nts. As much a inuation Page (Nonpriority amount
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Yes. List all of your priority identify what type of classible, list the claims Part 1. If more than or (For an explanation of Priority Creditor's Nar Number Street City Who incurred the de Debtor 1 only Debtor 2 only Debtor 1 and De At least one of the street of the control of the con	y unsecured claim laim it is. If a claim s in alphabetical o the creditor holds a each type of claim the State bbt? Check one.	ed claims against as. If a creditor has has both priority a rder according to particular claim, li , see the instructi ZIP Code	s more than one priority unsecured claim, and nonpriority amounts, list that claim her the creditor's name. If you have more than st the other creditors in Part 3. Cons for this form in the instruction booklet. Last 4 digits of account number	two priority unser	priority and nor cured claims, fi	ipnority amou ii out the Cont Priority	nts. As much a inuation Page of Nonpriority

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

page 1 of 7

Deb	otor 1	Veronica	N	Veal		0	19-	41979
		First Name	Middle Name	Last Name		Case number (if known) _		/ / / /
Par	t 2: List A	li of Your NGN	RIORITY Unsecured Ci	lai				
3.	Do any credi	itors have nonprior	ity unsecured claims against y	you?				
	No. You	have nothing to rep	ort in this part. Submit this form	n to the c	ourt with your other schedules.	,		
_	Yes.							
4.	List all of you unsecured cla	ur nonpriority unse aim. list the creditor	cured claims in the alphabetic	cal order	of the creditor who holds each	h claim. If a creditor has more than	1 one nong	priority
	more than on	e creditor holds a p	articular claim, list the other cre	each ciai editors in	m listed, identify what type of o	h claim. If a creditor has more thar claim it is. Do not list claims alread three nonpriority unsecured claims	y included	in Part 1. If
	Page of Part	2.			and the first of t	ance nonphonty unsecuted claims	ini out the	Continuation
_	1						Total	claim
4.1	Account S			L	ast 4 digits of account number	or 3928		\$911.00
		Creditor's Name			Then was the debt incurred?	02/01/2016		
	1802 Ne L	oop 410 Ste 400			s of the date you file, the clair			
		Street nio, TX 78217-5221		Ë	Contingent	in is. Check all that apply.		
	City	, TX 70217-0221	State ZIP Code	— C				
	Who incurr	ed the debt? Checi			Disputed			
	Debtor	1 only	one.	T	pe of NONPRIORITY unsecui	red claim:		
	Debtor	•			Student loans			
	Debtor	1 and Debtor 2 only	,			separation agreement or		
	At least	one of the debtors	and another	г	divorce that you did not repo	ort as priority claims		
	☐ Check i	if this claim is for a	community debt	_	Debts to pension or profit-st similar debts	naring plans, and other		
	Is the claim	subject to offset?		•	Other. Specify			
	₩ No				Medical Debt			
	Yes							
4.2	Acima			Ls	st 4 digits of account number	• 9407		\$1,812.00
	Nonpriority C	reditor's Name		_	hen was the debt incurred?			V1,012.00
	9815 S Moi				of the date you file, the claim	07/01/2018		
	Number Sandy LIT	Street		_	Contingent	i is: Check all that apply.		
	City	84070-4296	State ZIP Code	— <u> </u>				
	•	ed the debt? Check		ā	-			
	Debtor 1		one.	Ty	pe of NONPRIORITY unsecure	ed claim:		
	Debtor 2	-						
	_	1 and Debtor 2 only				eparation agreement or		
		one of the debtors	and another		divorce that you did not repo	nt as priority claims		
	☐ Check if	f this claim is for a	community debt	u	Debts to pension or profit-shi similar debts	aring plans, and other		
	is the claim :	subject to offset?			,			
	Mo No	•			Credit Card			
	Yes							
4.3	ADT			l a	st 4 digits of account number			\$699.20
	Nonpriority Co	reditor's Name		_				4000.20
	PO Box 371				of the date you file, the claim	04/11/2011		
	Number	Street			Contingent	is. Check all that apply.		
	City	PA 15250-0001	tate ZIP Code	- <u>ā</u>				
	•	d the debt? Check			•			
	Debtor 1		Jile.	Tyr	e of NONPRIORITY unsecure	ed claim:		
	Debtor 2			ď				
		and Debtor 2 only			Obligations arising out of a se	eparation agreement or		
		one of the debtors a	nd another		divorce that you did not repor	t as priority claims		
		this claim is for a c			Debts to pension or profit-sha similar debts	aring plans, and other		
	Is the claim s	subject to offset?	-	Ø				
	M No	•			Home Security System			
	Yes							

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

page 2 of 7

Case number (if known) 19-4/979

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Comcast Cable	Last 4 digits of account number 4532	\$64
lonpriority Creditor's Name	When was the debt incurred? 05/01/2007	
Po Box 7500 lumber Street		
- Garage	As of the date you file, the claim is: Check all that apply. Contingent	
Southeastern, PA 19398-7500 Xity State ZIP Code		
	Unliquidated	
Vho incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims	
Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
the claim subject to offset?	Other. Specify	
No No	Cable Television	
Yes		
OTE Energy	Last 4 digits of account number	\$1,810
onpriority Creditor's Name	Last 4 digits of account number	
OTE Energy	When was the debt incurred?	
O Box 740786	As of the date you file, the claim is: Check all that apply.	
umber Street	Contingent	
incinnati, OH 45274-0786	Unliquidated	
ty State ZIP Code	☐ Disputed	
ho incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or	
Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
Check if this claim is for a community debt	similar debts	
•	Other. Specify	
the claim subject to offset?	Residential Gas and Electric Company	
No		
Yes		
irst State Bank E. Detroit	Last 4 digits of account number 3956	\$525
onpriority Creditor's Name	When was the debt incurred? 01/01/2017	
2556 Gratiot Ave	As of the date you file, the claim is: Check all that apply.	
astpointe, MI 48021-2312	Contingent	
y State ZIP Code	Unliquidated	
ho incurred the debt? Check one.	Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	_	
•	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
At least one of the debtors and another		
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify	
No	Personal Banking Account	

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	r listing any entries on this page, number them beginning with 4	4.5, followed by 4.6, and so forth.	Total claim
4.7	Ginny's INC	_ Last 4 digits of account number 0438	\$268.00
	Nonpriority Creditor's Name	240	- 4200.00
	Po Box 2816 Number Street		
		 As of the date you file, the claim is: Check all that apply. Continuent 	
	Monroe, WI 53566-8016 City State ZIP Code		
	, ome zii code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
		Credit Card	
	☐ Yes		
4.8	Macomb County Community College Nonpriority Creditor's Name	Last 4 digits of account number 0332	\$1,050.00
	14500 12 Mile Rd	When was the debt incurred? 01/08/2013	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Warren, MI 48088	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	=	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Cither. Specify	
	No No	College Tuition	
	Yes		
4.9	Merchants and Medical Credit	Look & digital of an army to the same	\$552.00
	Nonpriority Creditor's Name	Last 4 digits of account number 9057	3552.00
	6324 Taylor Dr	When was the debt incurred? 12/01/2015	
Ì	Number Street	As of the date you file, the claim is: Check all that apply.	
	Flint, MI 48507-4680	Contingent	
	City State ZIP Code	Unliquidated	
	Who Incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
ı	Debtor 2 only	☐ Student loans	
Į	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
(At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	s the claim subject to offset?	Other. Specify	
	No No	Medical Debt	
1	Voc		

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

D-	L 4	4
130	ntor	7

 Veronica
 Neal

 First Name
 Middle Name
 Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	r listing any entries on this page, number them beginning wit	th 4.5, followed by 4.6, and so forth.	Total claim
4.10	TRIDENT ASSET MANAGEMENT Nonpriority Creditor's Name 53 Perimeter Ctr E Ste 440 Number Street Atlanta, GA 30346-2230 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Last 4 digits of account number 0937 When was the debt incurred? 10/01/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	\$385.00
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Bank Account NSF 	
	WOW Cable Nonpriority Creditor's Name Po Box 4350 Number Street Carol Stream, IL 60197-4350 City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number 1142 When was the debt incurred? 01/01/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$284.79
l	¥ No □ Yes	Home Cable Television	

Case number (if known) 19 - 4/979

Part 3: List Others to Be Notified About a Debt That You Already Listed

Credit Management LP Name Po Box 118288 Number Street Carrollton, TX 75011-8288 City State		On which entry in Part 1 or Part 2 did you list the original creditor?
Po Box 118288 Number Street Carrollton, TX 75011-8288		
Number Street Carrollton, TX 75011-8288		The Address of the Control of the Co
Carroliton, TX 75011-8288		Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims
		Part 2: Creditors with Nonpriority Unsecured Claims
State	ZIP Code	Last 4 digits of account number 2211
Collis and Griffor		On which entry in Part 1 or Part 2 did you list the original creditor?
1851 Washtenaw Rd		Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Pair 1: Creditors with Priority Unsecured Claims
Ypsilanti, MI 48197-1702		Part 2: Creditors with Nonpriority Unsecured Claims
City State	ZIP Code	Last 4 digits of account number 0332
Jefferson Capital System		
Vame		On which entry in Part 1 or Part 2 did you list the original creditor?
16 Mcleland Rd		Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
Saint Cloud, MN 56303-2198		
City State	ZIP Code	Last 4 digits of account number 9533
Midwest Recovery Systems LLC		On which entry in Part 1 or Part 2 did you list the original creditor?
ame		
2747 W Clay St A		Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street		Part 2: Creditors with Nonpriority Unsecured Claims
Saint Charles, MO 63301-2557		
City State	ZIP Code	Last 4 digits of account number 5033
·		One which entry in Part 1 or Part 2 did you list the original creditor?
lame		Dept 1: Credition with Bright University 101
hamber 21 i		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street		Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
State State	ZIP Code	
		One which entry in Part 1 or Part 2 did you list the original creditor?
ame		Line of (Check one); Part 1: Creditors with Priority Unsecured Claims
umber Street		
umpoi Gliect		Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
th.		·
ity State	ZIP Code	
		One which entry in Part 1 or Part 2 did you list the original creditor?
ame		Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
imber Street		
umber Street		Fatt 2: Creditors with Nonphormy Unsecured Claims
umber Street		Last 4 digits of account number

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1

Veronica Neal First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claim
Total claims	6f. Student loans	6f.	\$0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$8,945.60
		_	

Debtor 1	Veronica		Neal	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
Jnited States Ban	kruptcy Court for th	ie: Eas	stern District of Michigan	
Case number	19-419	79	North District Of Milenigan	_
(if known)				Check if this is
		_		amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired

	Person o	r company with \	whom you i	nave the contract or lease	State what the contract or lease is for
2.1	l America	an First Finance			Furniture
	Name				Contract to be ASSUMED
	Po Box	565848			
	Number				
	Dallas	TX 75356-5848			
	City	1X 13330-3646	State	ZIP Code	
	•			Zii Gode	
2.2	Post Of	Minhing A			Car
	Name	Michigan Auto Sa	les		Contract to be ASSUMED
	Number	8 Mile Rd Street			
		-			
	City	MI 48205			
	City		State	ZIP Code	
2.3					
	Credit A	cceptance Corpor	ation		Car Contract to be ASSUMED
	Name				Contract to be ASSUMED
	25505 W	12 Mile Rd			
	Number	Street			
	Southfiel	d, MI 48034-1846	<u> </u>		
	City		State	ZIP Code	
2.4					
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

page 1 of 1

Debtor 1	15			
Deptor 1	Veronica First Name	Middle Name	Neal	
Debtor 2	· ····································	мисие мате	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ban				Check if this is:
	1 -		rn District of Michigan	☐ An amended filing
Case number (if known)	17-4	1979		A supplement showing postpetition
				chapter 13 income as of the following da
				MM / DD / YYYY
official Form	า 1061			
chedule	—— Li Vous la			
				12/15 abtor 2), both are equally responsible for supplying corre
ouse is not filing widitional pages, wri	ite your name and	clude information about case number (if known).	our spouse. If more space is neede Answer every question.	ebtor 2), both are equally responsible for supplying corre- rmation about your spouse. If you are separated and you ad, attach a separate sheet to this form. On the top of any
Fill in your emp information.	loyment		Debtor 1	D.M. a
				Debtor 2 or non-filing spouse
If you have more attach a separat	e than one job,	Employment status	Employed Not Employed	☐ Employed ☐ Not Employed
information abou	ut additional	Occupation		— Employed — Not Employed
employers.		o o o a pation	CNA	
Include part time	, seasonal, or	Employer's name	Shelby Nursing Center	
self-employed w	ork.	Employer's address		
Occupation may	include student		46100 Shoenherr Road Number Street	Number Street
or homemaker, it	r it applies.			Number Street
				
			Utica, MI 48315	
			City State Zip	Code City State Zip Code
		How long employed the	re? 4 years 5 months	
		hly Income		
rt 2: Give Deta	ils About Mont	J moone		
Estimate monthly spouse unless you fryou or your non	y income as of th ou are separated. n-filing spouse hay	e date you file this form.		y line, write \$0 in the space. Include your non-filing
Estimate monthly spouse unless yo	y income as of th ou are separated. n-filing spouse hay	e date you file this form.		y line, write \$0 in the space. Include your non-filing
Estimate monthly spouse unless you flyou or your non	y income as of th ou are separated. n-filing spouse hay	e date you file this form.		mployers for that person on the lines below. If you need
Estimate monthly spouse unless you fi you or your non more space, attack	y income as of the purity income as of the purity are separated. In filling spouse have the a separate she as wages, salary.	e date you file this form.	For Deb	property for that person on the lines below. If you need stor 1 For Debtor 2 or non-filing spouse
If you or your non more space, attack List monthly gros deductions.) If not	y income as of th ou are separated. n-filing spouse have the a separate she as wages, salary, t paid monthly, ca	ne date you file this form. we more than one employed to this form. and commissions (befor loulate what the monthly well as the control of	For Deb re all payroll wage would 2. \$1,85	ptor 1 For Debtor 2 or non-filing spouse

Official Form 106!

Schedule I: Your income

			For De	btor 1	For Debtor 2 or non-filing spou	
5.	Copy line 4 here→ List all payroll deductions:	4.	\$1,9	53.07	\$0.	00
٠.	5a. Tax, Medicare, and Social Security deductions		to.	00 50	•	
	5b. Mandatory contributions for retirement plans	5a.		08.50	\$0.0	
	5c. Voluntary contributions for retirement plans	5b.		<u>\$0.00</u>	\$0.0	
	5d. Required repayments of retirement fund loans	5c.		\$0.00	\$0.0	
	5e. Insurance	5d.		<u>\$0.00</u>	\$0.0	
	5f. Domestic support obligations	5 e.		30.43	\$0.0	
	5g. Union dues	5 f.		<u> </u>	\$0.0	<u> </u>
	og. Onton dues	5g.		0.00	\$0.0	<u>xo</u>
	5h. Other deductions. Specify:	5h.	+	\$0.00	+\$0.0	<u> 20</u>
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$4:	38.93	\$0.0	00
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$1,5°	4.14	\$0.0	_
8.	List all other income regularly received:					_
	8a. Net income from rental property and from operating a business, profession, or farm					
	Attach a statement for each property and business showing gross					
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	4	0.00	40.0	
	8b. Interest and dividends	8b.		0.00	\$0.0	_
	8c. Family support payments that you, a non-filing spouse, or a	oz.	<u></u>	<u>v.oo</u>	\$0.0	<u>o</u>
	dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8c.	\$	0.00	\$0.0	0
	settlement, and property settlement.	8d.	\$	0.00	\$0.0	_
	8d. Unemployment compensation	8e.		0.00	\$0.0	-
	8e. Social Security	oc .				-
	8f. Other government assistance that you regularly receive					
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify: Other Government Assistance	8f.	\$16	0.00	\$0.00	<u>o</u>
	8g. Pension or retirement income	8g.	\$	0.00	\$0.00	<u>0</u>
	8h. Other monthly income. Specify:	8h.	+\$	0.00	+ \$0.0	<u>o</u>
	Specify:					
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$16	0.00	\$0.0	<u>o</u>
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$1,67	4.14 +	\$0.0	0 = \$1,674.14
11.	State all other regular contributions to the expenses that you list in Sche	dule . I				
	Include contributions from an unmarried partner, members of your househo friends or relatives.			our roomn	nates, and other	
	Do not include any amounts already included in lines 2-10 or amounts that	are not	available to nav	OVDADSO	s listed in Schedul	lo 1
	Specify:		available to pay	expense.		
12.						11.+\$0.00
	Add the amount in the last column of line 10 to the amount in line 11. The that amount on the Summary of Your Assets and Liabilities and Certain Sta	e result <i>tistical</i>	is the combined <i>Information</i> , if it	monthly i applies		12. \$1,674.14 Combined
13.	Do you expect an increase or decrease within the year after you file this t	form?				monthly income
	No.				 -	
	Yes. Explain:			_		

Official Form 106l

Schedule I: Your Income

٦	OH in this late.					
ı	ill in this information to i	dentify your o	ease:			
		eronica	Neal			
Ι.		rst Name	Middle Name Last Name	,	heck if this is:	
	Debtor 2 (Spouse, if filing)	rst Name	Middle Name Last Name		An amended filing	
l	United States Bankrupto			1 4	A supplement showing	ng postpetition
	_	9-4/9		t of Michigan	chapter 13 income as	s of the following date:
	Case number	7-41	77		MM / DD / YYYY	•
<u>O</u>	fficial Form 10	<u>6J</u>				
<u>S</u>	chedule J: \	our E	penses			12/1:
3e spa	as complete and accura	ite as possible	e. If two married people are filing	together, both are equally resp	onsible for supplying	
	rt 1: Describe You		and roun. On the top of any aud	litional pages, write your name :	and case number (if kr	own). Answer every question
-		nousenog				
1.	Is this a joint case?					
	No. Go to line 2.					
	Yes. Does Debtor	2 live in a sep	parate household?			
	U No □ V D-14					
2	Tes. Dept	or 2 must file	Official Form 106J-2, Expenses	for Separate Household of Deb	tor 2.	
۷.	Do you have dependented Do not list Debtor 1 and		□No			
	Debtor 2.	-	Yes. Fill out this information for each	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the deper names.	ndents'	dependent	Child	14	. ONo. Yes.
				Child	16	. DNo. EYes.
						□ No. □ Yes.
						□No. □Yes.
						. □No. □Yes.
•			57 €		-	ino. Li fes.
5.	Do your expenses inc expenses of people of yourself and your dep	ther than	☑ No ☑ Yes			
Pai	rt 2: Estimate Your	Ongoing M	onthly Expenses			
Est of a	imate your expenses a date after the bankrup	s of your ban tcy is filed. If	kruptcy filing date unless you a f this is a supplemental <i>Schedul</i>	re using this form as a suppler	ment in a Chapter 13 of	case to report expenses as
nc	ude expenses paid for	with non-cas	h government assistance if you	know the value of		r expenses
			n Schedule I: Your Income (Officenses for your residence. Include	•	-	i expenses
	rent for the ground or lo	ot.	The second of the second secon	o mae mangage payments and s	4. <u> </u>	
	If not included in line 4	k:				
	4a. Real estate taxes				4a	\$0.00
	4b. Property, homeown				4b	\$0.00
	4c. Home maintenance				4c.	\$0.00
	4d. Homeowner's associ	ciation or con	dominium dues		4d.	\$0.00

Official Form 106J

Schedule J: Your Expenses

 Veronica
 Neai

 First Name
 Middle Name
 Last Name

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5 .	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$669.00
	6b. Water, sewer, garbage collection	6b.	\$369.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$50.00
	6d. Other, Specify:	6d.	\$0.00
7.	Food and housekeeping supplies	7.	\$400.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning		\$0.00
10.	-	9.	\$100.00
11.		10.	\$100.00
12.		11.	\$0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$200.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	
14.	Charitable contributions and religious donations		\$50.00
15.		14.	\$0.00
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$44.00
	15b. Health insurance	15b.	\$27.48
	15c. Vehicle insurance	15c.	\$269.00
	15d. Other insurance. Specify:	15d.	\$0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ0.00
	Specify:	16.	\$0.00
17.	Installment or lease payments:		·
	17a. Car payments for Vehicle 1	17a.	\$260.00
	17b. Car payments for Vehicle 2	17b.	\$308.00
	17c. Other. Specify: Student Loan	17c.	\$50.00
	17d. Other. Specify:	17d.	400.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted		
	non your pay on tine 5, Schedule I, Your Income (Official Form 1061).	18.	\$0.00
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a.	\$0.00
	20b. Real estate taxes	20b.	\$0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
	20e. Homeowner's association or condominium dues	20e.	\$0.00

Official Form 106J

Schedule J: Your Expenses

De	btor 1	Veronica First Name	Middle Name	Neal	Case number (if know	m 19-4197
21.	Other. Spe		Made Maile	Last Name		
					21. +	\$0.00
22.	Calculate y	our monthly exp	penses.			
		nes 4 through 21			22a.	\$2,896,48
				if any, from Official Form 106J-2	22b	\$0.00
	22c. Add lir	ne 22a and 22b. [•]	The result is your month	nly expenses.	22c.	\$2,896.48
23.	Calculate y	our monthly net	income.			
	23a. Copy I	ine 12 (your com	bined monthly income)	from Schedule I.	23a .	\$1,674,14
	23b. Copy y	our monthly exp	enses from line 22c abo	ove.	 23b	\$2,896.48
			expenses from your mor	nthly income.	_	
	The re	sult is your <i>mont</i> i	hly net income.		23c	(\$1,222.34)
24.	Do you exp	ect an increase o	or decrease in your exp	enses within the year after you fil	ile this form?	
	For example	e, do you expect i	to finish paving for your	car loan within the year or do you of a modification to the terms of yo	avact	
	No	None		of you	aa. mangage :	

Fill in this information	on to identify your c	ase:						
Debtor 1	Veronica		Neal					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Ban	kruptcy Court for th	e: Eas	stern District of Michi	gan .				
Case number (if known)	19-419	79					Check if this is an amended filing	
Official Form	106Dec				_			
<u>Declaratio</u>	n About a	n Individu	ial Debtor's	s Sched	ules			12 <i>/</i> 15
			sponsible for supplyin					12/13
ears, or both. 18 U.S Sign Bel	.0. 33 102, 1041, 10	119, and 35/1.			raise statement, conce prisonment for up to 2			
	ree to pay someone	who is NOT an atto	rney to help you fill o	ıt bankruptcy fo	orms?			
No								
Yes. Name of pe	erson		A	ttach Bankruptc ignature (Officia	y Petition Preparer's No al Form 119).	tice, De	eclaration, and	
Under penalty of p	erjury, I declare tha	t I have read the sur	nmary and schedules	filed with this de	eclaraion and that they	are true	e and correct.	
₩ <u></u> \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		eal	x					

Official Form 106Dec

Date 02/24/2019 MM/ DD/ YYYY

Declaration About an Individual Debtor's Schedules

Date MM/ DD/ YYYY

Filt in this informati	on to identify your cas	0:			
Debtor 1	Veronica		Neal		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
	kruptcy Court for the:	Ea	stern District of Michigan		
Case number (if known)	19-419/9				

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current m	arital status?				
☐ Married					
Not married					
2. During the last 3 years,	, have you lived anywhere	other than where you	live now?		
☐ No		•			
Yes. List all of the pla	aces you lived in the last 3	years. Do not include w	there you live now.		
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
			Same as Debtor 1		Same as Debtor 1
14791 Jacob		From <u>7/1/2011</u>			
Number Street		To <u>05/1/2017</u>	Number Street		То
Eastpointe, MI 48021					-
City	State ZIP Code		City	State ZIP Code	-
			Same as Debtor 1		Same as Debtor 1
5114 Nottingham Number Street		From 12/1/2001			From
		To <u>11/1/2008</u>	Number Street		То
Detroit, MI 48224					
City	State ZIP Code		City	State ZIP Code	•

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

First Name Middle Name Last Name	Debtor 1	Veronica		Neal			19-41979
Sate 200 Property state or the two previous catendar years? FromInt/1/2008 To		First Name	Middle Name			Case number (if kno	wn)
Sale Cilibort FromI1/I/2008 FromI1/I/2008 FromI1/I/2008 FromIII/2008 FromIII/					_		
Number Street To OT/01/2011 Number Street Other	E034 O#	E#			Same as Debtor	1	Same as Debtor 1
Detroit, MI 48224 City State ZIP Code Mission, Puerfor Rico, Texas, Mashington, and Wisconsin.) For It is the total amount of income you recode for most all pipe and all businesses, textucing this year or the two previous calendar years? Fill in the details. Debtor 1 Sources of income Check all that apply. Code deductions and exclusions Check all that apply. Code of the code deductions and exclusions Check all that apply. Code all that apply. Code all that apply. Code all that				_ From <u>11/1/2008</u>			From
City State ZIP Code City State ZIP Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or farritory?(Community property states and furnitories include Arizons, Californis, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) (In No				To <u>07/01/2011</u>	Number Street		To
3. Within the last 8 years, did you ever live with a apouse or legal equivalent in a community property state or tentiory?(Community property states and tentiorists include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Weshington, and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2: Explain the Sources of Your Income 4. Did you have any income from employment or from operating a businesse substituting part-time authibites. If you are filing a joint case and you have income that you receive from all pless and all businesses, including part-time authibites. If you are filing a joint case and you have income that you receive to man if pless and exclusions) Debtor 1 Sources of income Gross Income Check all that apply. (before deductions and exclusions) Prom. January 1 of current year until the data's. Debtor 1 Sources of income Check all that apply. (before deductions and exclusions) Wages, commissions, bonuses, tips Operating a business Operating a business Operating a business Operating a business Wages, commissions, bonuses, tips Operating a business Operating a business, tips Operating a business Operating a business Operating a business Operating a business Operating a business, tips Operating a business, tips Operating a business, tips Operating a business, tips Operating a business, and gambing and tottery winnings. If you are time a pa		/II 48224		_			
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territor/?(Community property states and territoris include Arizona, California, Idasho, Louisiana, Nevada, New Maxico, Puerto Rico, Texas, Washington, and Wisconsin.) No	City		State ZIP Code	_	City	State ZIP Code	_
Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Yes. Make sure you fill out Schedule H: Your Income Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Yes. Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. Yes the total amount of income you received from all jobs and all businesses, including part-time activities. Yes the total amount of income you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1							
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Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Yes. Make sure you fill out Schedule H: Your Income Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Yes. Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. Yes the total amount of income you received from all jobs and all businesses, including part-time activities. Yes the total amount of income you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1	territories in	e last 8 years, did y Clude Arizona, Calife	ou ever live with a s omia, Idaho, Louisia	ipouse or legal equi	ivalent in a community p	roperty state or territory?(Cor	mmunity property states and
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are fifting a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 1 Sources of income Check all that apply. Check all that apply. Departing a business Departing a business and other with income that you received together, fist it only once under Debtor 1.	_		,	····· 1000000, 14019 [4]	exico, Fuelto Rico, lexas	s, wasnington, and Wisconsin.)
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are fifting a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 1 Sources of income Check all that apply. Check all that apply. Departing a business Departing a business and other with income that you received together, fist it only once under Debtor 1.	□ Yes M	ake sum you fill out	Sobodula I li Maria				
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income (before deductions and exclusions) Check all that apply. Wages, commissions, bonuses, tips Joperating a business For last calendar year: (January 1 to December 31, 2018 TYYY Wages, commissions, bonuses, tips Joperating a business Wages, commissions, bonuses, tips Joperating a business Wages, commissions, bonuses, tips Joperating a business Operating a business For the calendar year before that: (January 1 to December 31, 2017 TYYY Wages, commissions, bonuses, tips Joperating a business Operating a business Standard year? Wages, commissions, bonuses, tips Joperating a business Operating a business Standard years? Club you receive any other Income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income a elimony; child support; Social Security, unemployment, and other which benefit payments; pensions; rental income; interest; dividendes; money collected from the swearits; royathies; and gambling and lottery winnings. If you are lightly to the patch of the details.	— 100.10	ake sule you illi ou	. Scriedule H.: Your (Codebtors (Official F	orm 106H).		
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income (before deductions and exclusions) Check all that apply. Wages, commissions, bonuses, tips Operating a business For last calendar year: (January 1 to December 31, 2018 YYYY Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business Opera							
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No No No No No No N	Part 2: Exp	plain the Source	s of Your Incom	B			
If you are fiting a joint case and you have income that you receive together, list if only once under Debtor 1. No No No No Debtor 1 Debtor 2	4 Did same by						
Debtor 1 Sources of income Check all that apply. (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Operating a business For last calendar year: (January 1 to December 31, 2018 YYYY) Operating a business For the calendar year before that: (January 1 to December 31, 2017 YYYY) Operating a business Operating a business Operating a business For the calendar year before that: (January 1 to December 31, 2017 YYYY) Operating a business Oper	Fill in the total	ave any income from al amount of income	m employment or fi	rom operating a bus	siness during this year o	r the two previous calendar ye	ears?
Debtor 1 Sources of income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2018 Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2017 Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2017 Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2017 Wages, commissions, bonuses, tips Operating a business Debtor 2 Sources of income (before deductions and exclusions) Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business Debtor 2 Sources of income Check all that apply. Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business Debtor 1 Wages, commissions, bonuses, tips Operating a business Debtor 1 Wages, commissions, bonuses, tips Operating a business Debtor 1 Wages, commissions, bonuses, tips Operating a business Debtor 1 Wages, commissions, bonuses, tips Operating a business Debtor 1 Operating a business Description of the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other which benefit payments; pensions; rental income; interest, dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are lineable to the details.	If you are filir	ng a joint case and y	ou have income that	it you receive togeth	er, list it only once under	e activities. Debtor 1.	
Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 2 Sources of income Check all that apply. Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income (before deductions and exclusions) Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income (before deductions and exclusions) Debtor 2 Sources of income (before deductions and exclusions) Debtor 2 Sources of income (before deductions and exclusions) Debtor 1 Wages, commissions, bonuses, tips Doperating a business Deptor 1 Debtor 1	☐ No						
Sources of income Check all that apply. Sources of income Check all that apply. Gross Income Check all that apply. Wages, commissions, bonuses, tips Operating a business For last calendar year: (January 1 to December 31, 2018 Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2017 YYYY Operating a business Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business I wages, commissions, bonuses, tips Operating a business Operating a business I wages, commissions, bonuses, tips Operating a business I wages, commissions, bonuses,	Yes. Fil	i in the details.					
Sources of income Check all that apply. Chec			Debte	or 1			
Check all that apply.						Debtor 2	
From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$2,728.28 Operating a business Operating a business							Gross Income
date you filed for bankruptcy: Operating a business S2,728.28 Donuses, tips Operating a business			Oleci	сан тасарру.	(before deductions and exclusions)	Check all that apply.	
date you filed for bankruptcy: Operating a business S2,728.28 Donuses, tips Operating a business	From Janu	ary 1 of current ye	ar until the E Wa	ges, commissions,		Wages, commissions	
For last calendar year: (January 1 to December 31, 2018 YYYY Operating a business For the calendar year before that: (January 1 to December 31, 2017 YYYY Operating a business Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business Operating a business Determine the calendar year before that: (January 1 to December 31, 2017 YYYY Operating a business Operating a business Operating a business Operating a business Wages, commissions, bonuses, tips Operating a business	date you fi	led for bankruptcy	: _ bor	uses, tips	\$2,728.28	bonuses, tips	
January 1 to December 31, 2018 Donuses, tips S19,751.72 Doperating a business Doperating a b			Ш Оре	rating a business		Operating a business	
January 1 to December 31, 2018 Donuses, tips S19,751.72 Doperating a business Doperating a b	For last cal	lendar vear:	W Wa	nas commissions		D	
For the calendar year before that: (January 1 to December 31, 2017 YYYY Operating a business Wages, commissions, bonuses, tips John John John John John John John John		-	2018) bon		\$19,751.72		
For the calendar year before that: (January 1 to December 31, 2017 YYYY Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are long a joint case and you have income that you received together, list it only once under Debtor 1.		· - ,		rating a business		•	
(January 1 to December 31, 2017 bonuses, tips 511,414.79 Departing a business Donuses, tips Donuses,		_				. •	
Departing a business				jes, commissions,	\$11 <i>4</i> 1 <i>4</i> 70	Wages, commissions,	
5. Did you receive any other income during this year or the two previous calendar years? nclude income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other number incomes in the entity payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are No No Yes. Fill in the details.	(January 1		<u>vir</u> /		\$11,414.79		
white benefit payments; pensions; rental income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other lubtic benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are line and you have income that you received together, list it only once under Debtor 1. No Yes. Fill in the details.			шоре:	lading a business		☐ Operating a business	
public benefit payments; pensions; rental income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are No No Yes. Fill in the details.	5. Did you rec	eive any other inco	me during this year	or the true management	s calandar unava		
Yes. Fill in the details.	oublic benefit	Davments: pensions	mer mai income is t	axable. Examples of	other income are alimon	y; child support; Social Securit s; royalties; and gambling and	y, unemployment, and other lottery winnings. If you are
Dehtor 1	No No		-	2	,		
Dehtor 1	Yes. Fill i	n the details.					
Debtor 2							
	Depth 1				Debtor 2		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Veronica		Neal		Case number ((f known) 19-41979
	First Name	Middle Na	ime Last Name		110111001 (" www.ii)
			Sources of income Describe below.	Gross income from each source	Sources of income	e Gross Income from each source
			Describe Below.	(before deductions and exclusions)	Describe below.	(before deductions and exclusions)
_	_			-		exclusions)
From J date yo	lanuary 1 of curre ou filed for bankru	nt year until the ptcy:				
		•				
For las	t calendar year:					
	ry 1 to December 3	31, <u>2018</u>)				
		YYYY				
		•				
For the	calendar year bef	ore that:				
(Januai	y 1 to December 3					
		YYYY -				
Part 3: L	ist Certain Pay	ments You Ma	de Before You Filed f	or Bankruptcy		
6. Are eith	er Debtor 1's or De	ebtor 2's debts pr	imarily consumer debts?	•		
☐ No.	Neither Debtor 1	nor Debtor 2 has	i primarily consumer deb al, family, or household pu	ts. Consumer debts are de	fined in 11 U.S.C. § 101	(8) as "incurred by
				nay any creditor a total of \$6	6.425* or more?	
	No. Go to fine					
	paxu ur	ai creditor. Do no	include payments for dor	of \$6,425* or more in one o mestic support obligations,	r more payments and th such as child support a	ne total amount you nd atimony. Also, do
	HOL INC	ude payments to	an attorney for this bankri	uptcy case. nat for cases filed on or afte		
		A	and every 3 years after th	iat for cases fred on or affe	er trie date of adjustmen	t.
Yes.	Debtor 1 or Debt	or 2 or both have	primarily consumer debi	ts.		
	During the 90 day	/s before you filed	for bankruptcy, did you p	ay any creditor a total of \$6	600 or more?	
	No. Go to line	7.				
	uiciaae	ow each creditor payments for dor mey for this bank	nestic support obligations.	of \$600 or more and the tota , such as child support and	al amount you paid that alimony. Also, do not in	creditor. Do not clude payments to
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	American First Fin	ranco	01/10/10	#400 00	4	■Mortgage
	Creditor's Name	ante	01/10/19	\$130.00	\$2,411.96	Car
	Po Box 565848 Number Street		<u> </u>			Credit card
		E0.40				Loan repayment
	Dallas, TX 75356- City	State ZIP Cod	<u>fe</u>			Suppliers or vendors
						Other

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Veronica First Name	44'17' 51	Neal		Ca	se number <i>(if</i>	known) 19 - 419 79
	i not reame	Middle Name	Last Name Dates of payment	Total amount	paid Amount y	ou still owe	Was this payment for
	Credit Acceptance		02/19/2019		\$0.00	\$830.75	☐ Mortgage Car
	25505 W 12 Mile R Number Street	d	_				☐ Credit card
							Loan repayment
	Southfield, MI 4803 City	4-1846 State ZIP Code	•				☐ Suppliers or vendors
	·						☐ Other
you are a operate a	1 year before you file notude your relatives; a in officer, director, pers is a sole proprietor. 11 List all payments to an	on in control, or ow U.S.C. § 101. Inch	rs, relatives of any g	eneral partners; pa	artnerships of which y	ou are a gene	ral partner; corporations of which
				Total amount paid	Amount you still owe	Reason	for this payment
Insider's	Name						
Number	Street						
City	State	ZIP Code					
8. Within 1 Include pa	1 year before you filed lyments on debts guan	for bankruptcy, di anteed or cosigned	id you make any pa I by an insider.	yments or transfe	r any property on acc	count of a del	ot that benefited an insider?
Yes.	List all payments that i	penefited an inside	г.				
				iotal amount paid	Amount you still owe		or this payment reditor's name
Insider's I	Name						
Number	Street						
City	State	ZIP Code					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Veronica		Neal Neal		Case number (if kr	19-4197
	First Name	Middle Nam			Cuse Humber (# M	iowii)
	ry Legal Action	s, Kepesse	ssions, and Foreclosur	98		
. Within 1 year ist all such mat ontract dispute	before you filed filters, including per	or bankruptcy sonal injury ca	/, were you a party in any lav ses, small claims actions, di	vsuit, court action, or admini vorces, collection suits, pater	strative proceedin	g? t or custody modifications, a
☐ No	.				•	,
Yes. Fill in	the details.					
		Na	ture of the case	Court or agency		Status of the case
Case title	Macomb Commu College vs Veron		vil	37th District Court		Pending
Case number	Neal			8300 Common Rd		On appeal Concluded
odoc namber	102/3930			Number Street Warren, MI 48093-2	382	Car Constance
				City	State ZIP Coo	le
-	p.,	for bankruptc letails below.	y, was any of your property	repossessed, foreclosed, ga	rnished, attached,	seized, or levied?
No. Go to li						
▲ Yes. Filf in t	he information bel	ow.				
			Describe the pro	perty	Date	Value of the proper
Creditor's Name	<u> </u>		-			
lumber Stree	et		_ Explain what hap	ppened		
			Property was re	epossessed.		
			Property was fo			
			Property was g			
City	State	ZIP Code	Property was a	ttached, seized, or levied.		
Within 90 day use to make a No	payment been doc	for bankrupto e you owed a o	cy, did any creditor, including debt?	g a bank or financial instituti	on, set off any amo	ounts from your accounts o
	o details.		Describe the action the c	roditor took	D-4 et	
reditor's Name				reunor box	Date action was taken	Amount
umber Stree	t					
		ZIP Code				
		ZIP Code	Last 4 digits of account nur	nber: XXXX		
lumber Stree		ZIP Code	Last 4 digits of account nur	nber: XXXX		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

ebtor 1	Veronica	841.4.91	Neal	Case number (if kno	DWN) 19-41979
	First Name	Middle Name	Last Name		
. Within 1 pointed	1 year before you filed i receiver, a custodian, o	for bankruptcy, v r another officia	was any of your property in the poss !?	ession of an assignee for the benefi	t of creditors, a court-
No					
Yes					
art 5: Lik	st Certain Gifts and	Contribution	-		
			did you give any gifts with a total va	lue of more than \$600 per person?	
No			,	or many data per person.	
Yes. F	fill in the details for each	gift.			
Gifts wit per pers	th a total value of more son	e than \$600	Describe the gifts	Dates you gav the gifts	e Value
Person to 1	Whom You Gave the Gift				
Number	Street				
City	State	ZIP Code			
Person's	relationship to you				
l. Within 2 E No	years before you filed	for bankruptcy,	did you give any gifts or contribution	ns with a total value of more than \$6	00 to any charity?
Yes. Fi	ill in the details for each	gift or contributio	n.		
	contributions to charit I more than \$600	ies Describ	e what you contributed	Date you contributed	Value
Charity's Na	ame				
		 -			
Number	Street				
City	State ZIP C				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Veronica	Neal	Case number (if kn	own) <u>19-41979</u>
art 6: Lie	First Name M St Certain Losses	liddle Name Last Name	•	,
arto, Lip	Cortain Losses			
l5. Within 1 jambling?	year before you filed for i	bankruptcy or since you filed for bankruptcy, did you lose an	ything because of theft,	fire, other disaster, or
No				
Yes. Fi	Il in the details.			
Describe	the property you lost	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
and how	the loss occurred	Include the amount that insurance has paid. List pending		value of property lost
		insurance claims on line 33 of Schedule A/B: Property.		
art 7: Lis	t Certain Payments o	r Transfers		
6. Within 1	year before you filed for b ng bankruptcy or prepanin	pankruptcy, did you or anyone else acting on your behalf pay	or transfer any property	y to anyone you consuited
clude any	attorneys, bankruptcy petit	ng a manutupicy peution? ion preparers, or credit counseling agencies for services requin	ed in your bankruptcy.	
☐ No				
Yes. Fil	l in the details.			
		Description and value of any property transferred	Date payment or	Amount of normant
Debtor Co		_	transfer was made	Amount of payment
Person Who		Credit Counseling	******	
378 Sumr Number	nit Ave Street	_	02/13/2019	<u>\$14.95</u>
				
City	ty, NJ 07306-3110 State ZIP Code			
www.debt				
Veronica I	bsite address			
	Made the Payment, if Not Yo	ou		
7. Within 1 y	year before you filed for b	ankruptcy, did you or anyone else acting on your behalf pay	or transfer any property	to anyone who promised f
⇔p you aca	i with your creditors or to e any payment or transfer	make payments to your creditors?	•	
N o				
☐ Yes. Fill	in the details.			
		Paradist. 1 1 p	_	
		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who	Was Paid			
Number 3	Street	_		
	······································	_		
		_		
City	State ZIP Code			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

					1111111
Debtor 1	Veronica		Neal	Case number (if know	un) 19-41979
	First Name	Middle Name	Last Name		- <u> </u>
18. Within	2 years before you	filed for bankruptcy,	did you sell, trade, or other	vise transfer any property to anyone, other th	an property transferred in the
include bot	h outright transfers	ness or rinancial arrai and transfers made a	rs? s security (such as the grant)	ing of a security interest or mortgage on your p	
Do not incli	ude gifts and transf	ers that you have alre	ady listed on this statement.	g of a cocality intolocal of mortgage on your p	iopeny).
M No					
☐ Yes. F	fill in the details.				
		Descrip transfer	tion and value of property	Describe any property or payments received or debts paid in exchange	Date transfer was
		Junorei		received or debts paid in exchange	made
Person W	ho Received Transfer	·			
Number	Street				
					
		 ,			
City	State	ZIP Code			
Person's	relationship to you	·——			
19. Within 1	0 years before you	u filed for bankruptcy, protection devices.)	did you transfer any proper	ty to a self-settled trust or similar device of w	hich you are a beneficiary?
M No	Ollen Careu asser)	arcaection devices.)			
Yes. F	ill in the details.				
		Descript	ion and value of the proper	ty transferred	Date transfer was
		-			made
Name of	trust				
Dorf O. Bim	4 Cartain Finan			_	
raito: Lis	K Certain Finan	cial Accounts, Ins	truments, Safe Deposit	Boxes, and Storage Units	
20. Within 1	veat before you fi	led for hankrunten un	ero amu financial accounts o	r instruments held in your name, or for your t	
or uansierre	80 <i>f</i>				
cooperatives	king, savings, mor s. associations, and	ney market, or other fir I other financial institu	ancial accounts; certificates	of deposit; shares in banks, credit unions, brok	terage houses, pension funds,
□No		2 other manoar mona	BOIIS.		
Yes. Fi	ll in the details.				

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	First Name	Middle				
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing transfer
Flag Star	Bank					
Name of Fig	nancial institution		XXXX- <u>7 9 5 6</u>	Checking	07/18/2018	\$0.00
Number	Street			Savings		
Mannes	Sucer			■ Money market		
				■ Brokerage		
				☐ Other		
City	State	ZIP Code				
	e Bank E. Detroit					
Name of Fin	nancial Institution		XXXX- <u>5 6 3 0</u>	Checking	01/01/2018	<u>\$525.97</u>
22556 Gra	ratiot Ave			Savings		
	Street			_		
				Money market		
	·			Brokerage		
				☐ Other		
City . Do you n		ZIP Code	in 1 year before you filed for bank		DX of other depository for s	pcinities each c
City . Do you na luables?	State	ZIP Code	in 1 year before you filed for bankı		ox or other depository for s	ecurities, cash, o
City . Do you na luables?	State	ZIP Code	in 1 year before you filed for bankı		ox or other depository for s	ecurities, cash, o
City . Do you not under the second s	State	ZIP Code	in 1 year before you filed for bankı		ox or other depository for s	ecurities, cash, o
City . Do you not under the second s	State row have, or did y	ZIP Code	in 1 year before you filed for bank Who else had access to it?			ecurities, cash, or Do you still hav it?
. Do you no luables?	State row have, or did y	ZIP Code		uptcy, any safe deposit bo	ontents	Do you still hav
. Do you n luables? Mo Yes. Fill	State row have, or did y	ZIP Code ou have with		uptcy, any safe deposit bo	ontents	Do you still hav
. Do you not duables? No Yes. Fill	State now have, or did y I in the details.	ZIP Code	Who else had access to it?	uptcy, any safe deposit bo	ontents	Do you still hav it? □ No
City Do you not duables? No Yes. Fill	State Now have, or did y i in the details. nancial institution	ZIP Code	Who else had access to it? Name Number Street	uptcy, any safe deposit bo Describe the co	ontents	Do you still hav it? □ No
City I. Do you not be a little of the littl	State Now have, or did y I in the details. Translat Institution	ZIP Code	Who else had access to it?	uptcy, any safe deposit bo Describe the co	ontents	Do you still hav it? □ No
City !. Do you na duables?	State	ZIP Code	in 1 year before you filed for bankı		ox or other depository for s	ecurities
you nales?	State now have, or did y I in the details.	ZIP Code ou have with	Who else had access to it?	uptcy, any safe deposit bo	ontents	Do you still hav it? □ No
Do you nouables? No Yes. Fill	State Now have, or did y i in the details. nancial institution	ZIP Code	Who else had access to it?	uptcy, any safe deposit bo	ontents	Do you still hav it? □ No
Do you not uables? No Yes. Fill	State Now have, or did y i in the details. nancial institution	ZIP Code	Who else had access to it? Name Number Street	uptcy, any safe deposit bo Describe the co	ontents	Do you still hav it? □ No
City I. Do you not be a little of the littl	State Now have, or did y i in the details. nancial institution	ZIP Code	Who else had access to it? Name Number Street	uptcy, any safe deposit bo Describe the co	ontents	Do you still ha it? □ No

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Daldes d	Managina							(f known) 19 - 41979
Debtor 1	Veronica First Name	Middle	Name	Neal Last	Name		Case number	(if known) I / / / / /
				e has or h		ess to it?	Describe the contents	Do you still have it?
Name of S	torage Facility	·					_	□ No □ Yes
							_	4
Number	Street		Number	Street		_	_	
			City		State	ZIP Code	-	
City	State	ZIP Code						
art 9: Ide	entify Property	You Hold o	or Contro	l for Som	90119	Else		
23. Do you	hold or control an	y property th	at someon	e else owr	ns? inc	lude any pro	pperty you borrowed from, are storing	ng for, or hold in trust for someone.
No								
Yes. Fi	ill in the details.							
			Where is	s the prope	arty?		Describe the property	Value
Owner's N	ame		Number	Street			-	
Kumber	Street						-	
			City		State	ZIP Code	_	
City	State	ZIP Code						
Part 10: G	ive Details Abo	ut Environ	montal li	formatic	on .			
Environ: substan	oose of Part 10, the mental law means ces, wastes, or ma of these substance	any federal, terial into the	state, or lo	cal statute	or regu e water	lation concer , groundwate	ming pollution, contamination, release er, or other medium, including statutes	es of hazardous or toxic s or regulations controlling the
Site mea		cility, or proj		lined under	rany er	nvironmental	law, whether you now own, operate,	or utilize it or used to own, operate,
Hazardo		anything an	environme	ental law de	efines a	ıs a hazardo	us waste, hazardous substance, toxic	substance, hazardous material,
•	-		ngs that yo	u know ab	out, re	gardless of v	when they occurred.	
24. Has any	governmental uni	t notified yo	u that you	may be lial	ble or p	otentially lia	ble under or in violation of an envir	onmental law?
No								
Yes. Fi	ll in the details.							

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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btor 1	Veronica		Neal	Case num!	per (if known) 19-4197
	First Name	Middle Name	Last Name	 	
		Governm	entai unit	Environmental law, if you know it	t Date of notice
Name of sit	te	Governmen	tal unit		
Number	Street	Number	Street		
		City	State Z	IP Code	
City	State ZI	P Code			
: Hara rea	u potificet ame source	nmental unit of any re	alaana af b arrar	dana matasia (2	
No No	a noused any gover	michai uni or any i	rease or nazar	edes mater en f	
🔲 Yes. Fil	I in the details.				
		Governm	ental unit	Environmental law, if you know it	t Date of notice
Name of sit	be	Governmen	zal unit		
Number	Street	Number	Street		
		City	State Z	P Code	
City	State Zi	P Code			
Alexan sans	. h			ng under any environmental law? Include settle	ements and orders.
-	u been a party in any	/ judicial or administr	auve proceeds		
No	a been a party in any I in the details.	/ judicial of administr	auve proceeds		
No		/ Judicial of administr Court or a	•	Nature of the case	Status of the case
No	l in the details.	Court or a	gency	Nature of the case	Pending
V No ☐ Yes. Fill	l in the details.		gency	Nature of the case	
V No □ Yes. Fill	l in the details.	Court or a	gency	Nature of the case	Pending On appeal

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known) 19 - 4/979 Debtor 1 Veronica Neal First Name Middle Name Last Name Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation lacktriangled An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Name Number Name of accountant or bookkeeper Dates business existed _To_ City ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City ZIP Code

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1		Veronica		Neal	Case number (if known) 19 - 4/979
		First Name	Middle Name	Last Name	Case number (a known)
Part 12:	Sign	Below			
I have rea and corre bankrupt	ad the ect. I u	answers on this inderstand that m se can result in fi	Statement of Financial F naking a false statement, nes up to \$250,000, or in	lifairs and any attachment concealing property, or ot aprisonment for up to 20 ye	s, and I declare under penalty of perjury that the answers are true otaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
X_\ Sig	nature	White of Veronica Nea	2 1040 I, Debtor 1	Signature of	
Dat	e <u>02/2</u>	24/2019	-	Date	
Did you a No Yes	ttach a	additional pages	to your Statement of Fin	ancial Affairs for Individua	ils Filing for Bankruptcy (Official Form 107)?
Did you p	ay or a	agree to pay som	eone who is not an attor	ney to help you fill out ban	kruptcy forms?
Yes.	Name	of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information	on to identify your ca	ise:			
Debtor 1	Veronica		Neal		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the	: <u>Ea</u>	stern District of Michigan		
Case number (if known)	19-419	79			•

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Eor any cradito	m that you listed in Don't 4 - 5 O - 5 - 5 - 5 - 0			
below.	is that you listed in Part 1 of Schedule D: Cre	ditors Who Have Claims Secured by Property (Official Fo	rm 106D), fill in the information	
Identify the cre	editor and the property that is collateral	What do you intend to do with the property that Did you claim the p secures a debt? Did you claim the p		
Creditor's name: Description of property securing debt:	Credit Acceptance Corporation 2010 GMC G6	 ☐ Surrender the property. ☑ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	☑ No ☑ Yes	
Creditor's name: Description of property securing debt:	American First Finance Loveseat, Couch, 2 End Tables, 1 Cocktail Table	 □ Surrender the property. ☑ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☑ No ☑ Yes	
Creditor's name: Description of property securing debt:	Best Of Michigan Auto Sales 2010 Buick Lacrosse	 □ Surrender the property. □ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☑ No ☐ Yes	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Debtor 1

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

	Describe your unexpi	red personal property leases		Will the lease be assumed?	
	Lessor's name:	American First Finance		No	
	Department of the state of the			☑ Yes	
:	Description of leased property:	Furniture		(2) 165	
	Lessor's name:	Credit Acceptance Corporation		□ No	
	Description of leased property:	Car		☑ Yes	
	Lessor's name:	Best Of Michigan Auto Sales		□ No	
	Description of leased property:	Car		☑ Yes	
	Lessor's name:			□ No	
	Description of leased property:			☐ Yes	
	Lessor's name:			□ No	
	Description of leased property:			☐ Yes	
	Lessor's name:			☐ No	
	Description of leased property:			☐ Yes	
	Lessor's name:			□ No	
	Description of leased property:			☐ Yes	
Ра	rt 3: Sign Below				
F	Inder penalty of perjury, I property that is subject to	declare that I have indicated my in an unexpired lease.	ntention about any property of my estate	that secures a debt and any personal	
X	Diormon	e Mal	*		
•	Signature of Debtor 1		Signature of Debtor 2		
	Date 02/24/2019 MM/ DD/ YYYY	_	Date		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7